

PTO/SB/22 (08-03)

Approved for use through 7/31/2006, OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no person is required to respond to a collection of information unless it displays a valid OMB control number.

|  |                         |                                       |   |                         |  |          |   |                      |  |          |  |          |  |  |  |  |   |  |  |  |   |  |
|--|-------------------------|---------------------------------------|---|-------------------------|--|----------|---|----------------------|--|----------|--|----------|--|--|--|--|---|--|--|--|---|--|
| <b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b>  |                         | Docket No. (Optional)<br>263742000201 |   |                         |  |          |   |                      |  |          |  |          |  |  |  |  |   |  |  |  |   |  |
| <p>In re Application of      Bruce J. ROSEN et al.</p> <table border="1"> <tr> <td>Application Number<br/>09/836,625</td> <td>Filed<br/>April 16, 2001</td> </tr> <tr> <td colspan="2">For: METHODS OF PREVENTING AGGREGATION OF VARIOUS SUBSTANCES UPON REHYDRATION OR THAWING AND COMPOSITIONS OBTAINED THEREBY</td> </tr> <tr> <td>Art Unit<br/>1642</td> <td>Examiner<br/>M. Davis</td> </tr> </table>   |                         |                                       | Application Number<br>09/836,625                                  | Filed<br>April 16, 2001 | For: METHODS OF PREVENTING AGGREGATION OF VARIOUS SUBSTANCES UPON REHYDRATION OR THAWING AND COMPOSITIONS OBTAINED THEREBY |          | Art Unit<br>1642  | Examiner<br>M. Davis |  |          |  |          |  |  |  |  |   |  |  |  |   |  |
| Application Number<br>09/836,625   | Filed<br>April 16, 2001 |                                       |   |                         |  |          |   |                      |  |          |  |          |  |  |  |  |   |  |  |  |   |  |
| For: METHODS OF PREVENTING AGGREGATION OF VARIOUS SUBSTANCES UPON REHYDRATION OR THAWING AND COMPOSITIONS OBTAINED THEREBY   |                         |                                       |   |                         |  |          |   |                      |  |          |  |          |  |  |  |  |   |  |  |  |   |  |
| Art Unit<br>1642   | Examiner<br>M. Davis    |                                       |   |                         |  |          |   |                      |  |          |  |          |  |  |  |  |   |  |  |  |   |  |
| <p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired):</p> <table> <tr> <td><input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))</td> <td>\$ 110.00</td> </tr> <tr> <td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____</td> <td></td> </tr> <tr> <td><input type="checkbox"/> A check in the amount of the fee is enclosed.</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</td> <td></td> </tr> <tr> <td><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.</td> <td></td> </tr> <tr> <td><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>03-1952</u></td> <td></td> </tr> </table> <p>I have enclosed a duplicate copy of this sheet. Fee Transmittal form (PTO/SB/17) is attached to this submission in duplicate.</p> <p>I am the <input type="checkbox"/> applicant/inventor.<br/> <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71.<br/> Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).<br/> <input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>43,318</u><br/> <input type="checkbox"/> attorney or agent under 37 CFR 1.34(a).<br/> Registration number if acting under 37 CFR 1.34(a) _____</p> <p>March 16, 2004<br/> Date _____</p> <p>(650) 813-5995<br/> Telephone Number _____</p> <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p> <p><input checked="" type="checkbox"/> Total of <u>1</u> forms are submitted.</p> |                         |                                       | <input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1)) | \$ 110.00               | <input type="checkbox"/> Two months (37 CFR 1.17(a)(2))  | \$ _____ | <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | \$ _____             | <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) | \$ _____ | <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) | \$ _____ | <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____ |  | <input type="checkbox"/> A check in the amount of the fee is enclosed. |  | <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. |  | <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. |  | <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>03-1952</u> |  |
| <input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))  | \$ 110.00               |                                       |   |                         |  |          |   |                      |  |          |  |          |  |  |  |  |   |  |  |  |   |  |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2))  | \$ _____                |                                       |   |                         |  |          |   |                      |  |          |  |          |  |  |  |  |   |  |  |  |   |  |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3))  | \$ _____                |                                       |   |                         |  |          |   |                      |  |          |  |          |  |  |  |  |   |  |  |  |   |  |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4))   | \$ _____                |                                       |   |                         |  |          |   |                      |  |          |  |          |  |  |  |  |   |  |  |  |   |  |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))   | \$ _____                |                                       |   |                         |  |          |   |                      |  |          |  |          |  |  |  |  |   |  |  |  |   |  |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____   |                         |                                       |   |                         |  |          |   |                      |  |          |  |          |  |  |  |  |   |  |  |  |   |  |
| <input type="checkbox"/> A check in the amount of the fee is enclosed.   |                         |                                       |   |                         |  |          |   |                      |  |          |  |          |  |  |  |  |   |  |  |  |   |  |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.  |                         |                                       |   |                         |  |          |   |                      |  |          |  |          |  |  |  |  |   |  |  |  |   |  |
| <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.   |                         |                                       |   |                         |  |          |   |                      |  |          |  |          |  |  |  |  |   |  |  |  |   |  |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>03-1952</u>  |                         |                                       |   |                         |  |          |   |                      |  |          |  |          |  |  |  |  |   |  |  |  |   |  |